		Application Number		10/585,385						
TRANSMITTAL			Filing Date		July 6, 2006					
FORM		First Named Inventor		DeFrees, Shawn						
(to be used for all correspondence after initial filing)		Art Unit		1654						
		Examiner Name		Not Yet Assigned						
Total Number of Pages in This Submission		Attom	ey Docket Number	40853-01-	5138-US01					
ENCLOSURES (Check all that apply)										
Fee Transmittal Form	☐ Drawin	g(s)		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences						
Fee Attached	Licens	ing-related Papers								
Amendment/Reply (Preliminary)	Petition	1		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)						
After Final			n to Convert to a onal Application		Proprietary Information					
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			Status Letter						
Extension of Time Request		nal Disclaimer		Other Enclosure(s) (please identify below):						
Express Abandonment Request		☐ Request for Refund ☐ CD, Number of CD(s)		Sequence Listing (PDF and TXT files) Statement to Support Filing and Submission of Paper and Computer-Readable Copies of Sequence Listing in Accordance With 37 CFR §§ 1.821 Through 1.825 copy of Notice to Comply						
Certified Copy of Priority Document(s)		The Commissioner is authorized to charge any additional fees to Dep Account 50-0310.		charge any additional fees to Deposit						
Response to Missing Parts/ Incomplete Application			•							
Response to Missing Parts under 37 CFR 1.52 or 1.53										
			ICANT, ATTORNEY	, OR AGEN	Ť					
Firm Morgan, Lewis	& Bockius L	LP	D 1	lo EE 740						
Individual Ada O. Wong										
Signature ALO	Signature ALG MM									
Date November 24, 2008										
CERTIFICATE OF TRANSMISSION/MAILING										
Thereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.										
Typed or printed name Kathryn A. Degliantoni										
Signature Date November 24, 2008										

Fees pursuant to the Consolidated Appropriations Acts, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2009

(\$)270

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete if Known					
Application Number	10/585,385				
Filing Date	July 6, 2006				
First Named Inventor	DeFrees, Shawn				
Examiner Name	N/A				
Art Unit	1654				
Attomey Docket No.	40853-01-5138-US01				

METHOD OF PAYMENT	(check all that apply)							
☐ Check ☐ Credit Car	d Money Order [None Other (pl						
Deposit Account	Deposit Account Number:	50-0310	Deposit	Account Name: Morc	an, Lewis & Bockius LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge Fee(s) indicated below Charge Fee(s) indicated below, except for the filing fee								
☐ Credit any overpayments ☐ Credit any overpayments								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH	, AND EXAMINATION F	EES						
	FILING FEES	SEARCH FEES		EXAMINATIO				
Application Type	Small Entity Fee (\$) Fee (\$)	Small E	ntity Fee (\$)	Small Fee (\$)	Entity Fee (\$) Fees Paid (\$)			
Utility Application Type	330 165	540	270	220	110			
Design	220 110	100	50	140	70			
Plant	220 110	330	165	170	85			
Reissue	330 165	540	270	650	325			
Provisional	220 110	0	0	0	0			
2. EXCESS CLAIM FEES				_	Small Entity			
Fee Description	and the parameter			Fee I	\$) <u>Fee (\$)</u> 2 26			
Each claim over 20 (in	nciuding Reissues) im over 3 (including Reis:	:1100)		22				
Multiple dependent cla		, aco		39				
Total Claims		e (\$) Fee Paid (\$)			ole Dependent Claims			
20 or	HP =x		-	Fee (\$	Fee Paid (\$)			
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims Extra C	HP = X	e (\$) _ Fee Paid (\$)						
	total claims paid for, if gre	eater than 3.						
3. APPLICATION SIZE FE								
		s of naner (excluding ele	ectronically filed se	equence or computer	listings under 37 CFR 1.52(e)).			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application is size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction tehreof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets		imber of each addition	al 50 or fraction	thereof Fee (5				
58 100 =	58/50	(round	up to a whole nur	mber) x <u>135</u>	= 270			
4. OTHER FEE(S)					Fee Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge):								
SUBMITTED BY	_							

Name (Print/Type) This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, process) an appreciant. Some community of port of the USPTO. These to detection is established used. Any comments on the amount of time you require to complete his form and/or suggestions for reducing the burner, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 14/30, Alexandrish, V.S. 2331-445, D.O. NOT SEND FEES OR OWNETETE PORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Ada O. Wong

Registration No. 55,740

(Attomey/Agent)

Telephone 415.442.1490

Date November 24, 2008

Signature